

PHA Plans

Streamlined Annual Version

**U.S. Department of Housing and
Urban Development**
Office of Public and Indian
Housing

OMB No. 2577-0226
(exp. 08/31/2009)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan

for Fiscal Year: 2008

PHA Name: Housing Authority of Thurston County

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Housing Authority of Thurston County **PHA Number:** WA 049

PHA Fiscal Year Beginning: (July 2008)

PHA Programs Administered:

Public Housing and Section 8 Section 8 Only Public Housing Only
 Number of S8 units: :1946

PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

PHA Plan Contact Information:

Delores Faircloth
 TDD:

Phone: 360 753-8292 x 27
 Email (if available): Dee@HATC.org

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

PHA's main administrative office PHA's development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. Yes No.

If yes, select all that apply:

Main administrative office of the PHA
 PHA development management offices
 Main administrative office of the local, county or State government
 Public library PHA website Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

Main business office of the PHA PHA development management offices
 Other (list below)

Streamlined Annual PHA Plan
Fiscal Year 2008
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
- 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
- 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 6. Supporting Documents Available for Review
- 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists - SRO, Moderate Rehab and PBV programs. Applications are submitted at the sites and faxed to the Housing Authority for tracking. Process has been revised over the course of the year in order to expedite the tenant selection process. Racial and ethnic data was not collected by project for the current year.				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics
Drexel House	March 2007			
Evergreen Vista II	Sept 2007			
Homes First	Nov 2006			
Prairie Run Apts	Nov 2006			
Evergreen Vista I	Nov 2006			
Krislen Apts.	Nov 2006			
Community Youth Services Duplex	Nov 2006			
Tumwater Cove	Nov 2006			
B and B Apts	Nov 2006			
The Gardens	December 2007			
Fleetwood Apts.	Nov 2006			
Martin Terrace Apts	Nov 2006			

2. What is the number of site based waiting list developments to which families may apply at one time? ALL for which they are eligible. Some are designed for homeless, others for persons with disabilities, others for those over 62. Beyond those eligibility criteria, eligible families may apply for all lists and are encouraged to do so.
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list? No restriction.

4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year? The HATC will continue to have applications accepted at the sites of the PBV projects, the Fleetwood site (SR0) and the Martin Terrace site. (Mod Rehab). The Housing Authority of Thurston County will continue to maintain a waiting list of all the sites based on faxed applications that are submitted by the property managers. Pulling from the waiting list will be a joint effort between the Housing Authority and the sites.
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists? This is a new method designed by the Housing Authority over the past year.
3. Yes No: May families be on more than one list simultaneously?
If yes, how many lists? ALL projects for which the household qualifies.
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
 - PHA main administrative office – provides the list of properties.
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component. NA

A. Capital Fund Program

1. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in

its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund) NA

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).

2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
	<input type="checkbox"/> Revitalization Plan under development
	<input type="checkbox"/> Revitalization Plan submitted, pending approval
	<input type="checkbox"/> Revitalization Plan approved
	<input type="checkbox"/> Activities pursuant to an approved Revitalization Plan underway

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:

4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

5. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program (if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to the next component; if “yes”, complete each program description below (copy and complete questions for each program identified.)

2. Program Description:

a. Size of Program

- Yes No: Will the PHA limit the number of families participating in the Section 8 homeownership option? In practice, the number may be limited by the funding available under the Downpayment Assistance Program.

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

- Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:

- c. What actions will the PHA undertake to implement the program this year (list)?
- The Family Self Sufficiency Coordinator is providing Home Ownership counseling.
 - HATC has a grant from the WA State Department of Community Trade and Economic Development for a Downpayment Assistance Program which provides a second mortgage for the home.
 - HATC also administers the ADDI program for the County.

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family’s resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):

- Demonstrating that it has other relevant experience (list experience below): HATC has operated the program for several years and has closed on over 10 loans. A number of the homeowners either need the voucher assistance for a short period of time or they are able to secure the home and not utilize the voucher at all.

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - low utilization rate for vouchers due to lack of suitable rental units
 - access to neighborhoods outside of high poverty areas
 - other (describe below):
 - Creating partnerships with non-profit housing developers that provides for the long-term financial stability of their housing developments.
 - Preservation of housing stock available to voucher families.
 - Increasing rents and the tight market for units that are available to voucher families.
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):
 - County-wide eligibility.
 - The Housing Authority of Thurston County Board has voted to allow contracts up to the maximum level of budget authority.
 - The application process occurs semi- annually in March and September.

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: Thurston County and the City of Olympia.
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: list below)
 - ✓ Operation of a HOME Tenant Based Rental Assistance Program for transitional assistance for homeless individuals and families.
 - ✓ Technical support to non-profit developers in the creation of new housing units.
 - ✓ Entering into Project Based voucher contracts with non-profits creating new units
 - ✓ Attend meetings of the HOME Consortium.
 - ✓ Coordinate and facilitate meetings of the Thurston County Housing Task Force
 - ✓ Coordinate the Annual Homeless Census under contract with Thurston County.

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

- ✓ Funding of the HOME Tenant Based Rental Assistance Program through HOME and HB 2060 funding.- this program assists individuals and families access rental assistance and transitional housing support services.

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
√	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
√	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
√	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
Olympia and Thurston County Plans	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
HOME Consolidated Plan	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
√	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	Public housing rent determination policies, including the method for setting public housing flat rents. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	Schedule of flat rents offered at each public housing development. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
√	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
√	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
√	Any policies governing any Section 8 special housing types <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
√	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
√	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
√	Policies governing any Section 8 Homeownership program (Section 15 of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Public Housing Community Service Policy/Programs <input type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
√	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grantprogram reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
√	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Not applicable

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant:
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)				
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Not applicable

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name:			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		Federal FY of Grant:
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name:			Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Not applicable

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule				
PHA Name:		Grant Type and Number Capital Fund Program No: Replacement Housing Factor No:		Federal FY of Grant:
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates	

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Not applicable

	Original	Revised	Actual	Original	Revised	Actual	

8. Capital Fund Program Five-Year Action Plan

Not applicable

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name					
		<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:	FFY Grant: PHA FY:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

8. Capital Fund Program Five-Year Action Plan

Not applicable

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : ____ FFY Grant: PHA FY:			Activities for Year: ____ FFY Grant: PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						
Total CFP Estimated Cost			\$			\$

8. Capital Fund Program Five-Year Action Plan

Not applicable

Capital Fund Program Five-Year Action Plan					
Part II: Supporting Pages—Work Activities					
Activities for Year : ____ FFY Grant: PHA FY:			Activities for Year: ____ FFY Grant: PHA FY:		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Total CFP Estimated Cost		\$			\$

**Housing Authority of Thurston County
Organization Chart**

Board of Commissioners

Executive Director Executive Assistant

Rental Assistance

**Housing Program
Manager**

Housing Program
Specialists

Housing Program Assistants

Office Assistants

*Section 8/ Project Based Rental
Assistance Vouchers, Home,
Moderate Rehabilitation
Family Self Sufficiency Program
Front Office Operations*

Housing Development

**Housing Development
Manager**

Housing Rehabilitation Specialist

*CDBG Rehabilitation
Mansfield Apartments Moderate
Rehabilitation
Property Acquisition Management
Lead Base Paint Operations
Office Building Management*

Community Services

**Community Services
Manager**

Housing Program Specialists

FSS Coordinator

Emergency Apartments Manager

AmeriCorps Members

*Emergency Shelter Grants Programs
Emergency Shelter Assistance Program
Emergency Shelter Apartments
Mansfield Apartments
Individual Development Account
Family Self Sufficient Program
Property and Special Needs Tenant
Management
HOME/2060
Homeownership*

Administrative Services

**Housing Finance
Manager**

Finance Specialist

Fiscal Assistants

Finance Specialist

*Finance
Risk Management
Grants Management
Human Resources*

<p>Beverly Green 420 SW Sherman Street #121 Olympia, WA 98502</p> <p>352-2631</p>	<p>GUADALUPE DILDINE P O Box 8394 LACEY, WASHINGTON 98509</p> <p>412-1014 mover 10/31/2006</p>	<p>KELLY KELLOGG 205 Scott Street SE Tumwater, Washington 98501</p> <p>352-2804</p>
<p>Idyllis Humphrey</p> <p>923-5807 mover 11/06</p>	<p>HELEN PLAJA 1309 Fern. St. SW # SW 203 OLYMPIA, WASHINGTON 98502</p> <p>352-5629</p>	<p>ELLEN REBER 4217 HORNET DR. NE L456-8182ACEY, WASHINGTON 98506 456-8182</p>
<p>Jessica Johnson 7808 Sumurai Ct Lacey WA 98503</p>	<p>Donna Baldwin 4306 6th Avenue NE Olympia WA 98516</p> <p>4553296</p>	<p>Linda Donaldson 3600 14th Avenue SE #18-303 Olympia WA 98501</p> <p>459-2851</p>
<p>Elizabeth Anderson 2620 5th Ave Olympia WA 98506</p> <p>754-1219</p>		<p>Brandy Coffman 2530 Ruddell Rd SE #102 Lacey WA 98503</p>
<p>Greg Provenzano Columbia Legal Services 711 Capitol Way S #304 Olympia WA 98501 943-6585 x227</p>	<p>Kathleen Stone 510 Capitol Way N # 233 Olympia WA 98501</p> <p>754-0705</p>	<p>Shirley Moss 9031 B Boulder Ln SE Olympia, WA 98501</p> <p>943-2129</p>
<p>David Weidner 1025 Neil St NE #39 Olympia WA 98516</p> <p>481-2788</p>		<p>James Ward 533 Courtside St SW #D 204 Olympia WA 98502</p> <p>456-8415</p>
<p>Wendy Okert-Chissus 7020 Gaston Lane SW #A Tumwater WA 98501</p> <p>357-6608</p>	<p>Fatima Mustelier 9011 Old Highway 99 SW #406 Olympia, WA 98501</p> <p>923-9594</p>	<p>Dotty Peery 420 Sherman Street SW #106 Olympia, WA 98502</p> <p>754-0655</p>

Paul Grudis Evergreen Vista Apartments 1209 Fern St Olympia WA 98502 352-1315	Craig Chance 5129 Viewridge Dr. S. E. Olympia, Washington 98501	Nick Federici 2927 Cloverfield Dr. S.E. Olympia, WA 98501
Neil McClanahan 2000 Lakeridge Dr. Olympia, WA 98502	Cheryl Noel Sterling Savings HWY 12 & Foster Rochester, WA 98579	Lew Lewis 120 State Avenue N.E. #1027 Olympia, WA 98501-8212

Housing Authority of Thurston County
Board of Commissioners

Craig D. Chance
5129 Viewridge Dr. S.E..
Olympia, Washington 98501
Spouse: Kathy Chance

Chair
Date Appointed: 11/16/92
Term Expires: 10/16/2009
Position: #4

Cheryl Noel
P.O. Box 507
Rochester, Washington 98579
Spouse: Steve Noel

Commissioner
Date Appointed: 11/16/92
Term Expires: 10/31/2009
Position: #2

Neil McClanahan
2000 Lakeridge Drive
Olympia, Washington 98502
Spouse: Sandra McClanahan

Vice Chair
Date Appointed: 10/15/07
Term Expires: 10/15/12
Position: #1

Lloyd W.(Lew) Lewis
120 State Avenue N.E. #1027
Olympia, WA 985018212

Commissioner
Date Appointed: 6/18/90
Term Expires: 4/15/2009
Position: #3

Nick Federici
2927 Cloverfield Dr. S.E.
Olympia, WA 98501
Spouse:

Commissioner
Date Appointed: 1/10/05
Term Expires: 1/10/10
Position: #5

Marshall Hubard Burch
7202 Glenn Annie Dr. SW
Olympia, WA 98512

Alternate Position:
Date Appointed: November 19, 2007
Term Expire: November 19, 2012

Joelene Gioulis
Section Eight Participant

Date Appointed: 10/25/07

Board of Commissioners meet the 4th Thursday of each month at 12:00 Noon
in the Housing Authority's Conference Room - 503 W. 4th, Olympia.
Housing Authority of Thurston County

Board of Commissioners

Member	Occupation	Date Appointment Expires
Craig D. Chance, Chair Date Appointed: 11/16/92 Olympia, WA	Columbia Bank	Position: #4 Term Expires: 10/16/2009
Cheryl Noel Date Appointed: 11/16/92 Rochester, WA	Sterling Savings Bank	Position #2 Term Expires: 10/31/2009
Neil McClanahan Date Appointed: 04/02/02 Olympia, WA	Tumwater City Council	Position: #1 Term Expires: 10/08/12
Lloyd W.(Lew) Lewis Date Appointed: 6/18/90 Olympia, WA	WA State Legislative Code Reviser	Position: #3 Term Expires: 4/15/2009
Nick Federici Date Appointed: 01/10/05 Olympia,	WA State Legislative Office	Position: #5 Term Expires: 9/15/2009
Jolene Gioulis Date Appointed: 10/25/07 Olympia, WA	Section 8 Participant Advisory Committee	(HATC Board will renew on an annual basis)
Marshall Hubbard Burch 7202 Glenn Annie Dr. SW Olympia, WA 98512	Department of Corrections	Alternate Position: Date Appointed: November19, 2007 Term Expire: November 19, 2012

Participant Advisory Committee Meeting Minutes December 4, 2007

Participants: Shirley Moss, Meta Keller, Rose Ehret, William Dankiw, Vag Maji, Helen Dodge, Candice Comas, Marge Wolf, Participants; Coby Bradley, Jill Kruger, LIHI, Kay Huebner, Taanya McKinney, Cindy Klimas, Maureen Hill, Dee Faircloth, HATC

Welcome and Introductions were made.

Coby Bradley, LIHI gave information on LIHI and the populations owned in Thurston County. Questions and discussion followed.

Maureen reviewed the Proposed Timeline for the Planning Process. The Draft of the Plan will be available January 2, 2008, the Public Hearing for the Planning Process will be February 21, 2008 and submission due to HUD April 17, 2008.

Maureen gave overview of the Performance Report for the past year. The Housing Authority and Catholic Community Services signed a Housing Assistance Payments Contract for 25 studio units at Drexel House on Devoe Street in Olympia and went on line in March 2007. At the end of September two other projects submitted applications for project based contracts: (1) The Gardens includes 34 studio apartments for individuals with chronic mental illness; the project includes 24-hour staffing of the completely renovated building in Tumwater. (2) Evergreen Vista, Phase II includes 50 one, two and three bedroom units for special needs populations and families including those who have been the victims of Domestic Violence. The residents of the units will enter self-sufficiency contracts with on-site staff. Both of these projects have been approved and contracts are expected to be signed effective January 1, 2008.

Staff spent all of 2006 ratcheting up to get as many households assisted as possible. The high numbers carried to 2007 created a funding and unit month cap challenge. In the end, we received sufficient budget authority to assist all the persons under our utilization cap (1, 946 households for 12 months) but because we projected the program to exceed the cap, the Authority created a locally funded voucher program to cover some households in order to avoid terminating any contracts.

Because of the uncertainty of the funding and the expectation that our entire HAP allowance would be used, we were unable to increase the payment standard. We will end the calendar year in the 99% to 100% utilization. At the beginning of 2007 voucher holders who had not leased had their vouchers pulled. The vouchers will be reissued in early 2008 along with other folks at the top of the waiting list.

Virtually no households have been served from the waiting list during 2007 except for a few families who transitioned from the HOME TBRA program to the Voucher Program. Phase I is being renewed annually by HUD (28 units) and Phase II, the additional 12 units, are under contract until 2009. The owner is taking over the management himself after Shalimar retired from managing as of November 2006. During the year, there was assistance provided for the 40 units.

The HOME TBRA continued this year in partnership with Behavioral Health Resources, Bread and Roses, Emergency Shelter Network, HATC Housing and Transitional Services and State Transitional Housing and Operations (THOR) Program. The program assisted primarily homeless individuals and families to transition from homelessness. The Program served 171 households during the period September 1, 2006 through August 31, 2007. There were 48 new households.

The following policy changes were adopted by the Board during the year:

In June 2006, the Board adopted a preliminary application process for the Project Based Voucher Program to expedite the process and help the Housing Authority to anticipate the needs of projects for vouchers.

The Board approved a motion to authorize the Housing Authority of Thurston County to enter a Project Based Voucher Assistance Housing Choice Voucher Program Housing Assistance Payments Contract Existing Housing with Catholic Community Services for Drexel House, Intercommunity Housing for Evergreen Vista Phase II and with Behavioral Health Resources for The Gardens.

Other Administrative Plan Changes

Utility Schedules for 2007: The Housing Authority has contracted with an outside company to develop our utility schedule for gas, electric, and oil. HATC staff may need to do propane and wood projections. HATC needs to do the figures for water, sewer and trash. These were implemented for April 2007.

Payment Standard Changes: The Board accepted the staff recommendation to approve a payment standard increase. However, before it could be implemented an analysis showed that the budget could not support the increase so the implementation was delayed. It is now being proposed to be implemented in February 2008.

Procedural Changes:

Project Based Voucher Competitive Process for Applying for a Housing Assistance Contract for existing units' deadline of March 31, 2007 was extended to May 31, 2007 since there were no projects ready for the application phase.

The Project Based waiting list changes: although the applicant will go to the individual properties to apply for a unit, the applications will be maintained at the Housing Authority office and the Authority and the individual Project will coordinate offering the units to the next eligible person on the waiting list.

The following Proposed Policy Changes were presented for Discussion. After discussion, participants concurred with staff recommendations.

Absent Family Members Proposed Change:

Allow the addition of family members to the household even if adults and even if they were not in the original household if doing so would not overcrowd the unit. The family will not be entitled to a larger voucher until their annual or increased payment standard but the individual's income would be counted. If not in the original household, the family member would have to prove the relationship through the submission of a birth certificate. (Reasonable accommodation rules apply for a person with a disability requesting a live-in aide).

Live-in Aide Proposed Change

Requests for a live-in aide with all required documentation related to the request will be processed under the Reasonable Accommodation Procedures.

In addition, the family and live-in aide will be required to submit a certification stating that the live-in aide is (1) not obligated for the support of the person(s) needing the care, and (2) would not be living in the unit except to provide the necessary supportive services and that the aide will abide by the terms of the lease and program. (Proposed new form).

Updating the Waiting list Proposed Change

If the family fails to respond within at least 15 business days, the family will be removed from the waiting list **without further notice**.

With a written request, the application can be reinstated within one year of termination from the waiting list. (This time frame can be longer to accommodate a person with a disability who can demonstrate that the failure to respond was related to the disability).

Exceptions to Subsidy Standards

In determining family unit size for a particular family, the PHA may grant an exception to its established subsidy standards to accommodate a person with a disability and the request meets the criteria outlined in the Reasonable Accommodation Policy. The requested accommodation must be **necessary** for the disabled person's full enjoyment of HATC programs, and the necessity must be substantially related to the disability. HATC is not obliged to provide an accommodation or modification that, although not necessary, would be beneficial or convenient. HATC is also not obliged to provide an accommodation that may be necessary to the tenant but for reasons that are not substantially related to the disability.

Or if the PHA determines that the exception is justified by the age, sex, health, handicap, or relationship of family members or other personal circumstances. Reasons may include, but are not limited to: A need for an additional bedroom for medical equipment and a need for a separate bedroom for reasons related to a family member's disability, medical or health condition.

For a single person who is not elderly, disabled, or a remaining family member, an exception cannot override the regulatory limit of a zero or one bedroom. The PHA will consider requests for an exception for the purposes of accommodating a person with disabilities or other verified safety concerns for the members of the household.

The family must request any exception to the subsidy standards in writing. The request must explain the need or justification for a larger family unit size, and must include appropriate documentation. Requests based on the need for an accommodation for a person with a disability will require verification by a knowledgeable health professional familiar with the person's disability and able to verify that the accommodation is needed so that the person with the disability can have equal benefit of the program. The family's continued need for an additional bedroom due to special medical equipment must be re-verified at annual reexamination and each year it will be re-verified that the granted accommodation is being used for the purposes approved. E.g., the extra bedroom is being approved for medical equipment must in fact be used for this purpose in order to continue to receive the higher subsidy standard.

In lieu of approving an increase in the voucher size, the program may approve up to a 110% exception to the Payment Standard.

In the cases of a reasonable accommodation request, the timelines in that section of the plan will dictate the goals for responding to requests.

Where a person is moving to a new unit that exceeds the 40% criteria, and the applicant petitions for an exception and is able to demonstrate that this unit uniquely meets the needs of the petitioner or the petitioner has demonstrated that he/she has exhausted all available rental units, the case will be considered for an exception to the PS up to the maximum amount or the amount needed to get the unit below the 40% amount whichever is less for ONE year. This increase will be allowed for one year and thereafter will be capped at the Payment Standard in effect at the time of the Annual recertification.

In cases of an in-place tenant whose disability precludes their having to move and where the 110% exception is insufficient to meet the 40% test, with a approvable reasonable accommodation request, HATC staff will submit a request a waiver request to the US Department of Housing and Urban Development for an exception up to 120%. This approval will be maintained for one year and in future years will be capped at the current Payment Standard.

Temporary, Nonrecurring, or Sporadic Income This type of income (including gifts) is not included in annual income. Sporadic income is income that is not received periodically and cannot be reliably predicted. For example, the income of an individual who works occasionally as a handyman or who panhandles would be considered sporadic if future work could not be anticipated and no historic, stable pattern of income existed.

If income is sporadic but there is a history of the income over a period of at least six months, the income will be projected based on the six to twelve month history. If there is no available history, the participant would be advised to keep records in the future so that the income can be projected accurately. At the subsequent recertification, the projection would be based on the twelve-month prior history.

In the case of a household claiming zero income, the household has the obligation to report income as soon as any income is received.

In the absence of the ability to get third-party verification, the participant would be asked to self-certify based on their records, much like the tracking for self-employment.

Need to add to the Initial Eligibility questionnaire a question about assets that may have been disposed of within the prior two-year period. Administrative Plan will read:

Assets Family Declaration

Families must sign a declaration form at initial certification and each annual recertification identifying all assets that have been disposed of for less than fair market value or declaring that no assets have been disposed of for less than fair market value. The PHA may verify the value of the assets disposed of if other information available to the PHA does not appear to agree with the information reported by the family.

Adjusted Income

Amounts of medical expenses for the previous year which were not included in the annual or an interim determination of assistance can be used as part of the anticipated expenses for computing total medical expenses.

Proposed:

1. That the above be allowed.
2. That the IRS bulletin provide guidelines for the computation of medical expenses.
3. Non-prescriptions medications will be allowed based on evidence of the purchases since a pharmacy does not track the distribution and the doctor's prescriptions will not help determine the out-of-pocket costs, only that the medication has been prescribed. (For example, it will be insufficient for a participant to submit a statement from the doctor stating that aspirin is prescribed two times per day. The participant must verify sufficient purchases to demonstrate that the doctor's prescription has been fulfilled.)
4. To the extent that a participant is asking to include unique food or clothing items that are needed by the general population, e.g., special shoes, special food items, these items will be considered for inclusion only to the extent that

their costs would exceed the typical cost of such an item. For example, in a case where a doctor has prescribed particular shoes, the amount allowed will be the amount that the costs of the prescribed shoes exceeds a typical pair of shoes. And the participant has to be able to verify that the special items have been purchased.

5. Printouts from pharmacies for the prior year will be allowed to project medical deductions for the current year to the extent that the prescriptions are current. For example, if a drug was being prescribed only for part of the year and is not currently being taken by the individual, those costs would be excluded from the computation.
6. As part of the annual recertification process, individuals will be asked to identify the medication name, the prescribing physician and the name of the pharmacy in order to secure third-party verification of the costs.

Procedural Changed Proposed:

The eligibility and the annual questionnaire will ask the following questions to persons who are disabled or elderly:

How much did you pay for medical insurance premiums in the last year? _____
(Please attach a premium notice if you pay any premiums).

How much does Social Security deduct from your check for Medicare? _____
(No submission necessary; at the initial you will submit your award letter and annually we will get this information directly from the Social Security office).

How much did you pay yourself to doctors, dentists, other health care providers, hospitals or pharmacies for medical and dental related expenses? _____

If the answers to the above questions indicates that you may be eligible for a medical deduction, the Housing Specialist assigned to your recertification will send you a form to complete if you have out-of-pocket expenses for doctor, and pharmacy costs. If your only costs are associated with your medical premium, those sums will be computed automatically without further submissions.

Verification of Legal Identity and Documentation of Age

A birth certificate or other official record of birth is the preferred form of age verification for all family members. For elderly family members an original document that provides evidence of the receipt of social security retirement benefits is acceptable.

PHA Policy

If an official record of birth or evidence of social security retirement benefits cannot be provided, the PHA will require the family to submit other documents that support the reported age of the family member (e.g., school records, driver's license if birth year is recorded) and to provide a self-certification.

Age must be verified only once during continuously-assisted occupancy.

Family Relationships

Nan McKay language. Third-party verification from the state or local government agency responsible for the placement of the individual with the family is required.

Proposed Change: Third party verification from the state or local government agency responsible for the placement of the individual with the family is required initially and at annual recertification, if there is believed to be a change.

Pursuing an Eligible Activity

Proposed: The Housing Authority will allow child care costs for seeking work in all cases where the state is paying for the child care and the participant has a co-pay without further verification that the participant is seeking work. In cases where the participant is paying the full child care costs without payment from the state, the PHA will require the family to provide a record of job search efforts.

Life Threatening Conditions

The responsible party must correct life-threatening conditions within 24 hours of PHA notification. The owner will be required to repair an inoperable smoke detector unless the PHA determines that the family has intentionally disconnected it (by removing batteries or other means). In this case, the family will be required to repair the smoke detector within 24 hours.

Proposed:

In cases of any of the above conditions being identified on the phone by a tenant or in person by an inspector, the owner will be notified by phone within 5 hours and will be asked to take action to correct the deficiency and to fax a certification that the deficiency has been corrected.

Initial HQS Inspection

Proposed:

Appliances

If the family is responsible for supplying the stove and/or refrigerator, the PHA will allow the stove and refrigerator to be placed in the unit after the unit has met all other HQS requirements. The required appliances must be in place before the HAP contract is executed by the PHA. The PHA will execute the HAP contract based upon a certification from the family that the appliances have been installed and are working. A confirmatory inspection will be scheduled within 30 days of HAP contract approval.

Enforcing Owner Compliance

If the owner fails to maintain the dwelling unit in accordance with HQS, the PHA must take prompt and vigorous action to enforce the owner obligations.

HAP Abatement

If an owner fails to correct HQS deficiencies by the time specified by the PHA, HUD requires the PHA to abate housing assistance payments **no later than the first of the month following the specified correction period** *(including any approved extension) [24 CFR 985.3(f)]. No retroactive payments will be made to the owner for the period of time the rent was abated. Owner rents are not abated as a result of HQS failures that are the family's responsibility.

The PHA will make all HAP abatements effective the first of the month following the expiration of the PHA-specified correction period (including any extension)*.

The PHA will inspect abated units within 5 business days of the owner's notification that the work has been completed. Payment will resume effective on the day the unit passes inspection.

During any abatement period the family continues to be responsible for its share of the rent. The owner must not seek payment from the family for abated amounts and may not use the abatement as cause for eviction.

Question: *This would be a change. Would this be a better way to do abatements? Currently abatements take effect on the date of the inspection, not beginning at the first of the following month. Does Visual Homes permit making the effective date the first of the following months?

Insufficient Funding

The PHA may terminate HAP contracts if the PHA determines, in accordance with HUD requirements, that funding under the consolidated ACC is insufficient to support continued assistance for families in the program.

The PHA will determine whether there is sufficient funding to pay for currently assisted families according to the policies in Part VIII of Chapter 16. If the PHA determines there is a shortage of funding, prior to terminating any HAP contracts, the PHA will determine if any other actions can be taken to reduce program costs including the reduction in payment standard with waiver approval from HUD. If after implementing all reasonable cost-cutting measures there is not enough funding available to provide continued assistance for current participants, the PHA will terminate HAP contracts as a last resort. Prior to terminating any HAP contracts, the PHA will inform the local HUD field office. The PHA will terminate the minimum number needed in order to reduce HAP costs to a level within the PHA's annual budget authority.

If the PHA must terminate HAP contracts due to insufficient funding, the PHA will do so in accordance with the following criteria and instructions:

PROPOSED:

Terminate contracts where the housing assistance payments are less than \$100.00 per month. If this is insufficient, the assistance will be in ascending order with the lowest HAP terminated first until there is sufficient savings to stay within budget or unit month cap.

Change in Ownership/Assignment of the HAP Contract

The HAP contract cannot be assigned to a new owner without the prior written consent of the PHA. An owner under a HAP contract must notify the PHA in writing prior to a change in the legal ownership of the unit. The owner must supply all information as requested by the PHA. Prior to approval of assignment to a new owner, the new owner must agree to be bound by and comply with the HAP contract. The agreement between the new owner and the former owner must be in writing and in a form that the PHA finds acceptable. The new owner must provide the PHA with a copy of the executed agreement. Assignment of the HAP contract will be approved only if the new owner is qualified to become an owner under the HCV program according to the policies in Section 13-I.D. of this chapter. The PHA must receive a signed, written request from the existing owner stating the name and address of the new HAP payee and the effective date of the assignment in order to change the HAP payee under an outstanding HAP contract.

The new owner must provide a written certification to the PHA that includes: a copy of the escrow statement or other document showing the transfer of title and recorded deed; a copy of the owner's IRS Form W-9, Request for Taxpayer Identification Number and Certification; the effective date of the HAP contract assignment; a written agreement to comply with the terms of the HAP contract; and confirmation that the new owner is not a prohibited relative.

Proposed:

To modify our change of ownership form to add the certifications about compliance with terms of the contract and that the new owner is not a prohibited relative.

HAP Contract Contents

In addition, PHAs have the discretion to add language to Part A of the HAP contract that defines when the housing assistance payment by the PHA is deemed received by the owner (e.g., upon mailing by the PHA or actual receipt by the owner).

Question. . Do we want to do this in the HAP contract? To define that the housing assistance payments by the PHA are deemed received by the owner using the date of mailing by the PHA

Criminal Prosecution

When the PHA determines that program abuse by an owner, family, or PHA staff member has occurred and the amount of overpaid subsidy meets or exceeds the threshold for prosecution under local or state law, the PHA will consult with the HUD Office of Inspector General (OIG) or to other appropriate local, state, or federal entity.

Question: Do we want to add this to the policy? Need to check with Prosecuting Attorney's office to see what threshold amount is for Thurston County.

Repayment

Proposed:

Owner Debts to the PHA

Any amount due to the PHA by an owner must be repaid by the owner within 60 days of the PHA determination of the debt.

If the owner fails to repay the debt within the required time frame and is entitled to future HAP payments, the PHA will reduce the future HAP payments by the amount owed until the debt is paid in full.

If the owner is not entitled to future HAP payments the PHA will offer to enter into a repayment agreement in accordance with the policies below.

If the owner refuses to repay the debt, enter into a repayment agreement, or breaches a repayment agreement, the PHA will ban the owner from future participation in the program and pursue other modes of collection.

Family Debts to the PHA

Any amount due to the PHA by an HCV participant must be repaid by the family. If the family is unable to repay the debt within 30 days, the PHA will offer to enter into a repayment agreement in accordance with the policies below.

If the family refuses to repay the debt, enter into a repayment agreement, or breaches a repayment agreement, the PHA will terminate the assistance upon notification to the family.

Repayment Agreement [24 CFR 792.103]

The term *repayment agreement* refers to a formal document signed by a tenant or owner and provided to the PHA in which a tenant or owner acknowledges a debt in a specific amount and agrees to repay the amount due at specific time periods.

Repayment Agreement Guidelines

Down Payment Requirement

Prior to the execution of a repayment agreement, the owner or family must make the first payment on the balance owed to the PHA.

Payment Thresholds

- Amounts between \$3,000 and the Federal or State threshold for criminal prosecution must be repaid within 36 months.
- Amounts between \$2,000 and \$2,999 must be repaid within 30 months.
- Amounts between \$1,000 and \$1,999 must be repaid within 24 months.
- Amounts under \$1,000 must be repaid within 12 months.

Execution of the Agreement

The head of household and spouse/cohead (if applicable) must sign the repayment agreement.

Due Dates

All payments are due by the close of business on the 5th day of the month. If the 5th does not fall on a business day, the due date is the close of business on the first business day after the 5th.

Non-Payment

If a payment is not received by the end of the business day on the date due, and prior approval for the missed payment has not been given by the PHA, the PHA will send the family a delinquency notice giving the family 10 business days to make the late payment. If the payment is not received by the due date of the delinquency notice, it will be considered a breach of the agreement and the PHA will terminate assistance upon written notification to the family.

If a family receives 3 delinquency notices for unexcused late payments in a 12-month period, the repayment agreement will be considered in default, and the PHA will terminate assistance upon written notification to the family.

No Offer of Repayment Agreement

The PHA will not enter into a repayment agreement for a second offense if there is already a repayment agreement in place with the family or owner.

Records Management**Medical/Disability Records**

PHAs are not permitted to inquire about the nature or extent of a person's disability. The PHA may not inquire about a person's diagnosis or details of treatment for a disability or medical condition. If the PHA receives a verification document that provides such information, the PHA should not place this information in the tenant file. The PHA should destroy the document or black out these details if the document contains information related to income and/or deductions.

Data Collection and Record Keeping

At least quarterly, the PHA must attempt to obtain from the public health department(s) with a similar area of jurisdiction, the names and/or addresses of children less than 6 years old with an identified environmental intervention blood lead level.

If the PHA obtains names and addresses of environmental intervention blood lead level children from the public health department(s), the PHA must match this information with the names and addresses of families receiving HCV assistance, unless the public health department performs such a procedure. If a match occurs, the PHA must carry out the notification, verification, and hazard-reduction requirements discussed in Chapter 8, and the reporting requirement discussed above.

At least quarterly, the PHA must also report an updated list of the addresses of units receiving assistance under the HCV program to the same public health department(s), unless the public health department(s) states that it does not wish to receive such a report.

The public health department(s) has stated they **do not** wish to receive a report of an updated list of the addresses of units receiving assistance under the HCV program, on a quarterly basis. Therefore, the PHA is not providing such a report.

Task: Need to update this language based on Public Health policy.

Discussion: Reasonable Accommodations Policies and Procedures document will become an exhibit to the Administrative Plan and is based on a policy adopted by the Tacoma Housing Authority recently.

Public Hearing Minutes February 21, 2008

The Public Hearing for the Housing Authority of Thurston County Planning Process was held on February 21, 2008.

Opening of Public Hearing: 12:00

Maureen Hill gave an overview of the Plan. The plan has been made available to the public for review at the Olympia Library.

The Participant Advisory Committee met and the following proposed policy changes in the Administrative Plan were presented:

1. Returning absent family members
2. Allowing addition of Adult Family Members to HH
3. Defining Live-In Aide as a full time household member
4. Cutting down the number of letters sent to applicants who do not respond to waiting list notices
5. Clarification on Temporary, Nonrecurring, or Sporadic Income
6. Asset disposition declaration added to Initial and Annual certifications
7. Clarification on the process for medical expense verification for the purposes of granting deductions to elderly and disabled households.
8. Requirement for the submission of a birth certificate in cases where a question arises about the eligibility for a household member's status for deduction purposes
9. For foster parents who are requesting extra bedrooms for foster children, the family will be required to submit a certification from the State agency as to the status as a foster home.
10. Inclusion of a statement about verifications needed in certain circumstances where a family is requesting child care deductions when seeking employment.
11. Clarification of what HATC considers "life-threatening" emergencies of inspected property for the purposes of triggering a 24-hour response.
12. Permission to approve a contract conditionally where an appliance to be supplied by the tenant is not in place at the time of the initial inspection.
13. Change of the effective date of HAP abatement to the first of the month following the final inspection rather than the date of the inspection.
14. Adding language to the HAP contract that the housing assistance payments are deemed to have been made as of the date of the mailing of the HAP check to clarify when late charges may be due to the owner.
15. Establishes priority strategies to reduce the costs of active contracts if at any point HATC projects that it will have insufficient funds to honor all contracts because of funding limitations.
16. Spells out in detail the repayment requirements for overpaid assistance to landlords and tenants and identifies when cases might be turned over to the OIG's office for prosecution.
17. Clarifies the records keeping policy of HATC with respect to persons with disability where detailed information about a person are submitted to HATC and provides written policy on shredding documents that are more than 3 years old.
18. Reasonable Accommodation Policy – revised policy based on THA adopted plan.
19. Transition Plan for the Reasonable Accommodation Policy implementation.

Proposal presented to HATC at the Participant Advisory Meeting:

The Fleetwood Apartments are seeking a set-aside of 11 units of housing for homeless veterans who are referred by the Veteran's Administration.

Staff Recommendation

That the Fleetwood be permitted to give priority to homeless veterans referred by the Veterans Administration. However, the units should not be held off the market for more than 30 days. If there is not a qualified veteran on the waiting list the unit is to be offered to the next qualifying homeless individual.

Voucher Port Restrictions

For the Board's information:

The Housing Authority will lift its current restriction on eligible voucher holder requests to port to any jurisdiction regardless of the Payment Standard or whether the receiving Housing Authority is willing to absorb.

At this time, it is difficult to justify budget-wise the restriction of vouchers.

There were no public comments:

Public Hearing Closed.